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Mr. Winfield

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An Ocular Disposition

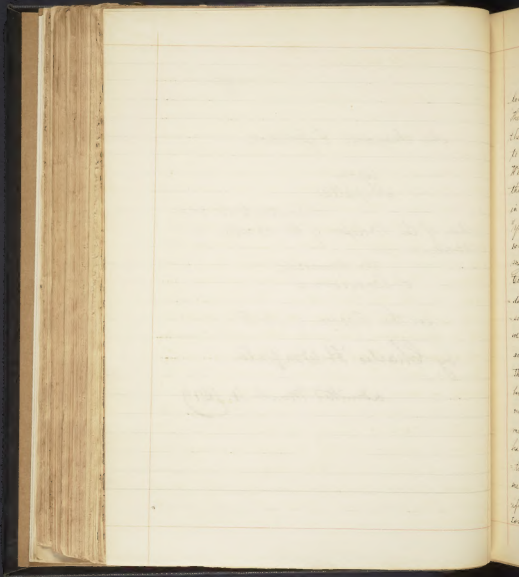
Upon
Hepatitis

Submitted to the exam-
-ination of the Professors of the Faculty of
Medicine in
the University
of Pennsylvania

for the Degree of M.D.

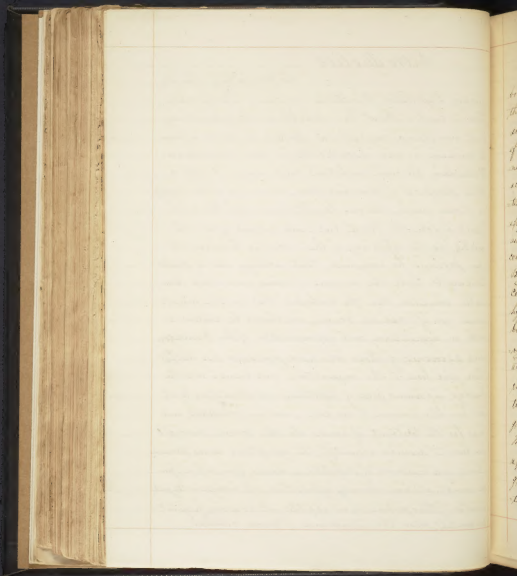
by Charles H. Warfield -

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Introduction

In presenting the following Dissertation, I institute no claim to originality. There is such a thirst for novelty in the present day, that something new, appears essential, to elude a person to eminence, or even respectability, in their professions. We disclaim all such ambitions, and resign to others, those prospects of perennial fame, accruing from drifting in a new guise, theories taught, and forgotten, with "years before the flood" but now palmed upon the world, as the offspring of their prolific brains. It may perhaps be imagined, that nothing has a greater tendency to chill the energies of genius, and damp laudable emulation, than the statement, that in this enlight-ened age of medical science, we should be contented with an acquaintance, and appropriation, of the knowledge and discoveries, of those who have preceded us. Rather than give loose to the imagination, and launch into the boundless, and various fields of hypothesis, and speculations, be it our humbler province, to lay down judicious principles, and rules for the treatment of diseases. In this exercise, our object has been to describe accurately, the symptoms, causal formations, and treatment of Anaplexia; a disease, from which, few are exempt, and more especially afflicts those, who indulge in the gratification of their propensities, and appetites, and as a very frequent concomitant, upon the intemperance of warm climates.



The Liver is the largest vessel in the body, and in consequence of its complete covering over the digestive process, holds a very important rank in the animal economy. Before entering into a description of the diseases, to which the liver is exposed, it will be necessary to give, a concise anatomical, and physiological account of it. The liver is a large glandular body, situated in the right hypochondrium, extending thro' the epigastric, and a part of the left hypochondriac regions, and in the foetus, fills nearly the whole abdomen, and covers the stomach, and is in contact with the spleen. Being in the adult placed immediately under, and in contact with the diaphragm, as well as the right hypochondrium, protects it from their form and is concave below, and convex above. Thus situated, it is of an irregular figure, between the circle, and oval, broader at the right side than the left, and very irregular in thickness. The edge which is in contact with the right hypochondriac region, is very thick - it gradually becomes thinner towards the left, and foot. The liver is smooth, and regular, upon its upper surface, upon its under concave surface, made rough by several grooves, or fissures, and eminences. This organ is retained in its situation, by several ligaments; but it

must be confessed, that it is susceptible of considerable motion, by respiration, the action of the diaphragm, and position of the body. Besides the four ligaments, which are reflections of the peritoneum, including the umbilical vein in the foetus, degenerated into a ligament in the adult, the vena Cava, Vena portarum, hepatic artery, Vena Cavae hepaticae (to be explained presently), a distended state of the stomach, and Colon, touching the liver on its anterior edge, may also be considered as auxiliary supports to this viscera. Its figures are, the Umbilical, which commences at a notch in the anterior edge of the liver, to the left of the middle, and continues to the posterior edge. Thence this figure begins the Umbilical ligament enters, and at, or near its termination, the Vena Cava, is situated. This figure divides the liver into its great lobes, the right and left. Another great figure, called the transverse, or principal, commences in the right lobe, and extending to the left, crosses the first at right angles - it is very deep and nearer the posterior, than the anterior edge of the liver. Near to the right extremity of this figure, the Vena portarum, and the hepatic artery enter, and the hepatic duct emerges. About the middle of this figure are situated two prominences, one on each side, which were called the porta. Besides the great lobes above men-



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quantity of yellow matter insoluble, remains near. Soda was
precipitated, and some sulphate, in the water. Still, no
evidence of iron. Whether the iron scales and the iron
from the system, the superfluous carbon, as supposed by
Dell and Richardson, thereby acting as an auxiliary to the
lungs as a point which is shrouded in obscurity and in the
present state of physiological knowledge, is difficult to deter-
mine. We are far from attributing to this process any injury
in the lungs, as alleged by Haller, of protecting the heart
from the impetus of blood, brought by the Arteries. The
this function is a sort of a valve, to prevent
inflow, along with the pericardial juice, poured upon the
summit, converted by the gastric liquor into a soft mass.
Secondly, the action of the stomach produces a chemical action, and
according to some Philosophers separates the chyme into
the excrementitious part, and its milder, alkaline, and so-
luble parts, are absorbed by the lacteals, and taken into the
circulation. In this doctrine, controversy, we are by no means
solicitous to enter. I have only to state, that the acid is easily
receptive, and to prove it, make the following experiment. — Take
equal quantities of St. bile, and blood, put them into
vessels of the same size, and exposed to the same degree of
heat. In the third day the blood began to putrefy, and the
bile remained in its natural state. So the billiousness
action diminished; the discharge from the bowels became



a clear colour.

Of the complexion, we have a lesson, to which flesh is here, none perhaps so much inadequate song, and poetical, than the affections of the Liver. It is a matter of speculation, but seems likely to be a disease, one who in affections of the Liver, is the physical spirit, exhausted, no longer vibrant, and probably brilliant. The blood is often in the liver, but, for the most part, had of returning health, and vigour, but in diseases of the noble viscera now under consideration, we perceive the patient's mind as it were, overcast with a dark, and impenetrable cloud, covering only the sombre side of every picture - a mark - a perfect misanthrope in habit, in disposition; the bright of society is gone, and the gloomy shades of the soul, seeks comfort, and alleviation of his misery in pain, in brooding over his afflictions. The physician seeks in the connection of these viscera with the brain, an explanation of this fact; but researches however do not affect us in this labyrinth of difficulties. It seems clear, that in disease, the functions of the liver, and of the spleen, are in proportion to the quantity of blood sent to the stomach, and in this dilemma, what we not to look to the great influence exercised over the mind, by the digestive organs as a principal cause? We know that



in inflammation of the liver, the hepatic powers are even
much impaired. Broussais in his medical lectures mentions the
spontaneous tubercles and also a peculiar mineral water, and says
sometimes the water has even a seductive effect. These diseases
do not at present claim our attention — to consider
them individually, would present a wider range, than is
contemplated, or consistent with the time allotted, for pre-
sents this paper. It is not our intention to give a
manuscript upon the diseases which Broussais
who has written so ably upon the subject, has localized in the
liver. Nor shall we repeat upon the symptoms incident
to an increased secretion: it is the cause which is
sought — We must therefore content ourselves with calling
a few flowers, as we humbly pass along.

Hepatitis. Broussais.

• susceptible both of acute and chronic inflammation.
The former Dr Saunders observes, as being more intimately
connected with its arteries, the latter with its venous
system. Dr Cullen has said it is the same as the
liver. Dr Broussais. The venous side acute and chronic.
It is white or dark brown, sometimes on the surface, and
observation can show therefore, it is in the hepatic
tissue. It is probable that acute inflammation is more
common, where we have, than chronic. It is said to be
in the first stage, because these symptoms, are not in place



... on other organs, the circulation, covering the liver, the
... of the substance of the liver itself— and that when
... not become affected, the others may successively partake
... in the disease— and so continue, with an effort, that
... the colic, pain, diarrhoea, and vomiting, a correct opinion
... be formed, whether the substance, or the membrane
... be affected.

Stomachic affections, &c. other intestinal
diseases, commences with some degree of flatulency, and
regret, which in some instances are so slight, as not to be
noticed on the patient's account. In an increase of heat,
a gradual, strong, and hard pulse— increased vomiting—
and a sharp— acute pain on the right side, increased by
pressure, extending to the top of the Scapulae, a 9° disten-
tion by flatus, often between the vertebrae of the neck; and
to the lower, the rigidity— and tenderness— the
patient lies on the left side, and upon that side, more or
less, owing to an inflammation, or distension of the large
intestine, and now comes covering the lower part of the
stomach and right iliac fossa, and into the hypogastrium,
which is not however to be considered as a distension of the large
intestine, because it appears in very protracted periods, and ac-
cording to Richter, is very much influenced by the manner
in which it is treated. The colour also yellow, is scaling
in passing urine, a dyspeptic mixture, or 2° tenacious and



by him ascribed to the granular, and non-mucous matter of
the bile — the same occurs at different parts of the bowels
exposed — Laceration of the intestines — the bowels are
swollen in small patches, and lined with a membrane, the
bowels are either obstinate constipation, or diarrhoea was
thereby resulting, morbidly increased secretion — the large
or sigmoides covered with a white crust, and together with
the mouth, and fauces, are extremely dry. These symptoms
in consequence of the resemblance they bear to those
described may be the known indications of constipation
with them. A correct diagnosis however may be formed
by attending to the history, the progress of the complaint.
The diseases which are marked by vomiting, and diarrhoea
vomiting, gastritis, inflammation of the stomach, and
must be distinguished from mucous diarrhoea by the
"cough, dyspnoea, and an enlarged liver, and being more
frequent." — Inflammation may be difficult to form in the
stomach, except when it is increased by the back-swing
the stomach not enlarged. From gastritis, it is the lot
to irritate the pain in the stomach is distressing,
and the circulation so great that a fever, however
mild, can be retained in some cases, stomach
more frequent, the constipation. From gastritis, pain in
the large bowels, usually in the sigmoides, and
alternating with diarrhoea, pains, in one, or more of



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alter of these, mother blood crowds to the part, the eye
will become injected, and a quantity of considerable amount
is thrown out as a protection for the patient, conceals
the liver with some neighbouring vessels & the symptoms
of pleurisy and loss of pain continues. But it increases rapidly
for a few days, & escapes from which "Pleurisy" state
may contain several cuts of Miller, and in some in-
stances no one sees the liver, liver considerably enlarged.
Pleurisy seen but one case which occurred after a long
and painful, and it was seen at a late period, the
same suppuration has been observed in the stomach
the reason, the case may be treated with high fever
some tension and recoils. But it makes a remarkable
confession to be made, the man is almost lost his physical
attainment and ability. Then suppuration takes place on
the convex surface, adhesions having been previously formed
the matter points & travels, but may be evacuated by an
incision thro' the parietes of the abdomen. When coming
in contact with the diaphragm, the pus distends the membrane
under the thoracic parietes, the parietes, and is discharged in the
mouth. The extensive case is very rare but witnesses a few
months since, on the New York Hospital the patient was
suffering from "Pleurisy" & loss of weight & large
with a yellow hue, pulse rather quick, full and soft,
night sweat, and other symptoms of a tubercular suppurated



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the vessels of the liver and spleen being so much enlarged
as to be almost the diameter of the main trunk of the
arterial system in the mesentery. Hence the bile
becomes inspissated and gives rise to various morbid
actions; at other times prevents the bile from passing down the
ducts causing a regurgitation of it, into the stomach which
either excites sick head aches, or induces vomiting
with a torpid state of the bilious secretion then
it is frequently an absorption. In the first, from
this peculiar yellowing of the skin, called by
Larrey, *bon hyemous*. *Terminations of Chronic*
Hepatitis. 1st In Abscess. produced
most probably, by the impediment to the trans-
mission of blood, thro' the vena porta from the in-
creased force of the circulation. the consequence is
great acidity of the absorbents, and rupture of the
vessels of the Vena Cava. 2^d In the formation of the
extensive Abscesses. 3^d In suppuration. the particular state
of the liver in this morbid affection has been already
explained. *Treatment.* Bleedings should first be
promised - the least must not suffice. be handled
with such an enlarged hand as in the usual form of
the disease. Small bleedings and gradually applied
to be regulated by the symptoms which from such
effusions. 2^d Cathartics. Senna and Rhubarb



is Glauker, and Epsom Salts or Calomel, and Sarsaparilla com-
monly or occasionally, if it comes to this, in the first place. This
not only reduce arterial action, but being much de-
pendent on the improvement of the liver, its some de-
grees, purging may be carried to an almost incredible
the extent - and the patient who is subjected to
these profuse evacuations, so far from being debilitated
and sinking, is improved. We should therefore with-
out hesitation, evacuate the bowels of our patient, even
after the use of one of the above mentioned Cathartics
if the stomach, and right hypochondrium were much
distended, and the powers of the system want sustain-
such vigorous treatment. 3^d Small Doses of Antimony
at Night, and Calomel - which not only evacuate the
bowels, increase the flow of bile, and assist in restoring tone
to the liver. 4th The application of Cups, is also advocate
second. 5th That the most important topical applica-
tion is Mercurial Ointment, continually discharging by being
troffed with Mercurochrome Ointment, or a succussion of
Tine. 6th Butlers in some species of fever, appear to ad-
vocate the use of the same, in the early stages of
febrile disease. For hepatitis there are probably, a
stimulating, and then evacuating topicalities. 6th Dieting.
7th These remedies failing to eradicate the Complaint, we
should appeal to the Assistance of the Medical Doctor

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Mercury - this medicine in its operation upon the sys-
tem, exerts a wider purgading influence, than any other,
and has been supposed to act specifically, upon the gien-
dalar, and absorbent systems. It is a point that has
been much agitated, and canvassed, but apparently cannot
impart any Magic influence to our remedies, why Medi-
cines should select with an apparent fashionless, one
system of Vessels rather another, upon which to exert their
peculiar powers. The patient should be subjected to a
slight Syphilis - during which, he should be protected from
the deleterious consequences of the vicissitudes of the weather,
and not venture out of his room, if the atmosphere be
cold, or damp. Exercise in the open air, if the febrile
secretion be moderate, and the weather mild, will
be highly serviceable. If debility prohibits the exhibi-
tion of Calomel, which we consider the most eligible
form of Mercury, the tone of the system must be restored
by nutritious, and moderately stimulant animal food -
this being effected, our Medicine should be resorted to, and
persevered in - About one Drachm of Mercurial Ointment,
rubbed upon the right hypochondrium, or thigh, may
be conjoined, to accelerate the syphilis. Arnic Acid
has attained a considerable reputation in Chronic Syphilis -
One, to four drachms may be taken in divided doses, in
the twenty four hours - A pleasant formula is, to make

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it into a Julep, with Mucilage of Gum arabic, and
Mint, or Governor's water, with Loaf sugar off acidity
in the primæ Viæ should exist, give the feed of
Rabies as a solution of Carbonate of Soda, or what is
preferable, Carbonate of potash in solution, or more
into Pills, with Rhubarb - or Magnesia. All inflam-
matory symptoms having been completely removed, we
should now call into our aid, Tonics - as Colombo, the
Bitter Chafanon, and Decoctum, the Tincture of Bark
in Port Wine, the various preparations of Iron, Cold
Baths, generous Diet, Porter, Brandy, and Water, Exer-
cise, Agreeable Company - Mineral Waters, into whose
composition, Iron, and the Neutral Salt, enter - and finally
a Journey, which is so exciting, will be calculated by the pos-
sibility it affords, diversified scenes presented, mingling with
the world, alternately borne upon the pinions of hope, and
expectations to beguile the lonely way, and prevent our
patient from sinking into a state of Exinan, which degener-
ates into Melancholy, than which, nothing has a greater
tendency to mar the enjoyment of life, and induce into
the Cup of domestic tranquillity, the baneful ingredients
of discontent, meanness, and jealousy.

Finis

